



PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875			Application or Docket Number 12.584
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APPLICATION AS FILED – PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a), (b), or (c))	N/A	N/A
SEARCH FEE (37 CFR 1.16(k), (l), or (m))	N/A	N/A
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))	N/A	N/A
TOTAL CLAIMS (37 CFR 1.16(j))	15 minus 20 =	-
INDEPENDENT CLAIMS (37 CFR 1.16(h))	1 minus 3 =	-
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	

MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))

* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE (\$)	FEES (\$)	RATE (\$)	FEES (\$)
N/A	385	N/A	
N/A		N/A	
N/A		N/A	
X =	-	X =	
X =	-	X =	
N/A		N/A	

TOTAL 385

TOTAL

APPLICATION AS AMENDED – PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
		Total (37 CFR 1.16(j))		24	Minus		
Independent (37 CFR 1.16(h))							
Application Size Fee (37 CFR 1.16(s))							

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)
x 9 =	36	x =	
x =	-	x =	
N/A		N/A	

TOTAL ADD'L FEE 36

TOTAL ADD'L FEE

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
		Total (37 CFR 1.16(j))		22	Minus		
Independent (37 CFR 1.16(h))							
Application Size Fee (37 CFR 1.16(s))							

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))

RATE (\$)

ADDITIONAL
FEE (\$)

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/07 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number
10/807,041

Filing Date
March 23, 2004

Applicant(s)

Joseph K. Garretson et al

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* Indep	* Depend	* Indep	* Depend	* Indep	* Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	X			X		X	51					
2		X		X		X	52					
3	X			X		X	53					
4	X			X		X	54					
5	X			X		X	55					
6	X			X		X	56					
7	X			X		X	57					
8	X			X		X	58					
9	X			X		X	59					
10	X			X		X	60					
11	X			X		X	61					
12	X			X		X	62					
13	X			X		X	63					
14	X			X		X	64					
15	X			X		X	65					
16		X			X		66					
17		X			X		67					
18		X			X		68					
19		X			X		69					
20		X			X		70					
21		X			X		71					
22		X			X		72					
23		X			X		73					
24		X			X		74					
25							75					
26							76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
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41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					

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